

Foster Family Home - Corrective Action Report

Provider ID: 1-150068

Home Name: Florimar Jay Miyat, CNA

Review ID: 1-150068-5

1352 Anapa Street

Reviewer: Pamela Perry

Honolulu HI 96818

Begin Date: 7/10/2020

Foster Family Home

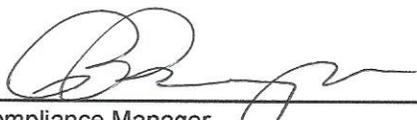
Required Certificate

[11-800-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

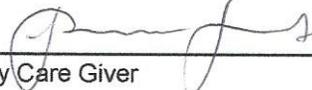
Comment:

6.(d)(1)- Unannounced visit on 7/10/20 for a 2 bed CCFFH Recertification visit. Home in compliance with all regulations. Home will receive a 2 bed certificate.



Compliance Manager

7/14/20
Date



Primary Care Giver

7/14/20
Date